

#3

PTO/SB/01(12/97)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted  
with Initial  
Filing

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
37 CFR 1.16 (e))  
required)

Attorney Docket Number	PC10825A
First Named Inventor	Mark A. Sanner, et al.
<b>COMPLETE IF KNOWN</b>	
Application Number	09/919,630
Filing Date	July 31, 2001
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMIDAZOLE DERIVATIVES

(Title of the Invention)

the specification of which  
☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 07/31/2001 as United States Application Number or PCT International

Application Number 09/919,630 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/221,724	07/31/2000	
60/228,394	08/28/2000	
60/229,437	08/31/2000	

COPY OF PAPER  
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**DECLARATION ---- Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number  
or

Place Customer  
Number Bar Code  
Label here

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	Robert T. Ronau	36,257
Raymond M. Speer	26,810	Michelle A. Sherwood	36,271
Israel Nissenbaum	27,582	Gregory P. Raymer	36,647
J. Trevor Lumb	28,567	Garth Butterfield	36,997
Lawrence C. Akers	28,587	Alan L. Koller	37,371
Paul H. Ginsburg	28,718	Todd M. Crissey	37,807
James T. Jones	30,561	A. David Joran	37,858
Raymond D. Thompson	30,695	Kristina L. Konstas	37,864
Gregg C. Benson	30,977	Arlene K. Musser	37,895
A. Dean Olson	31,185	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Carl J. Goddard	39,203
Grover F. Fuller Jr.	31,760	Jennifer A. Kispert	40,049
Martha A. Gammill	31,820	Gabriel L. Kleiman	40,681
Seth H. Jacobs	32,140	Jeffrey N. Myers	41,213
Mervin E. Brokke	32,723	Adrian G. Looney	41,406
Karen DeBenedictis	32,977	Robert T. Barker	41,597
Valerie M. Fedowich	33,688	Roy F. Waldron	42,208
Bryan C. Zielinski	34,462	Deborah A. Martin	44,222
Lorraine B. Ling	35,251	Elsa Djuardi	45,963
Jolene W. Appleman	35,428	Donna R. Grossu	47,248
E. Victor Donahue	35,492	Martha G. Munchhof	47,811

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  
or Bar Code Label



OR ☒ Correspondence address below

I hereby declare that all statements made herein of my own knowledge and belief are true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname	
Mark A.		Sanner	
Inventor's Signature	<i>Mark A. Sanner</i>		Date
Residence: City	Old Saybrook	State	CT
		Country	USA
Post Office Address	8 Hillcrest Drive		
City	Old Saybrook	State	CT
		Zip	06475
		Country	USA

☐ Additional inventors are being named on the third page, a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box →

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
--------------------	--

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Chris J.				Helal			
<b>Inventor's Signature</b>		<i>Christophe J. Helal</i>				<b>Date</b>	
Residence: City		Mystic	State	NJ	Country	USA	Citizenship
Post Office Address							
Post Office Address		8 Elm Place					
City		Mystic	State	CT	Zip	06355	Country
						USA	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Christopher B.				Cooper			
<b>Inventor's Signature</b>						<b>Date</b>	
Residence: City		Lawrenceville	State	NJ	Country	USA	Citizenship
Post Office Address							
Post Office Address		5 Stoney Creek Place					
City		Lawrenceville	State	NJ	Zip	08648	Country
						USA	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Frank S.				Menniti			
<b>Inventor's Signature</b>						<b>Date</b>	
Residence: City		Mystic	State	CT	Country	USA	Citizenship
Post Office Address							
Post Office Address		10 Reynolds Hill Road					
City		Mystic	State	CT	Zip	06355	Country
						USA	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Patricia A.				Seymour			
<b>Inventor's Signature</b>						<b>Date</b>	
Residence: City		Westerly	State	RI	Country	USA	Citizenship
Post Office Address							
Post Office Address		29 Little Brook Road					
City		Westerly	State	RI	Zip	02891	Country
						USA	

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Chris J.				Helal			
Inventor's Signature						Date	
Residence: City		Mystic	State	NJ	Country	USA	Citizenship USA
Post Office Address							
Post Office Address		8 Elm Place					
City		Mystic	State	CT	Zip	06355	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Christopher B.				Cooper			
Inventor's Signature						Date	
Residence: City		Lawrenceville	State	NJ	Country	USA	Citizenship USA
Post Office Address							
Post Office Address		5 Stoney Creek Place					
City		Lawrenceville	State	NJ	Zip	08648	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Frank S.				Mennib			
Inventor's Signature						Date	
Residence: City		Mystic	State	CT	Country	USA	Citizenship USA
Post Office Address							
Post Office Address		10 Reynolds Hill Road					
City		Mystic	State	CT	Zip	06355	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Patricia A.				Seymour			
Inventor's Signature		<i>Patricia A. Seymour</i>				Date <i>2/1/02</i>	
Residence: City		Westery	State	RI	Country	USA	Citizenship USA
Post Office Address							
Post Office Address		29 Little Brook Road					
City		Westery	State	RI	Zip	02891	Country USA

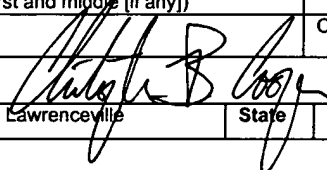
Please type a plus sign (+) inside this box →

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Chris J.				Helal			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Mystic	<b>State</b>	NJ	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b>	8 Elm Place						
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Christopher B.				Cooper			
<b>Inventor's Signature</b>						<b>Date</b>	1-22-2002
<b>Residence: City</b>	Lawrenceville	<b>State</b>	NJ	<b>Country</b>	USA	<b>Citizenship</b>	USA
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<b>Post Office Address</b>	5 Stoney Creek Place						
<b>City</b>	Lawrenceville	<b>State</b>	NJ	<b>Zip</b>	08648	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Frank S.				Menniti			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Mystic	<b>State</b>	CT	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b>	10 Reynolds Hill Road						
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

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Given Name (first and middle (if any))				Family Name or Surname			
Patricia A.				Seymour			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Westerly	<b>State</b>	RI	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b>	29 Little Brook Road						
<b>City</b>	Westerly	<b>State</b>	RI	<b>Zip</b>	02891	<b>Country</b>	USA

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Chris J.				Helal			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Mystic	<b>State</b>	NJ	<b>Country</b>	USA	<b>Citizenship</b>	USA
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Christopher B.				Cooper			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Lawrenceville	<b>State</b>	NJ	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
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<b>City</b>	Lawrenceville	<b>State</b>	NJ	<b>Zip</b>	08648	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Frank S.				Menniti			
<b>Inventor's Signature</b>	<i>Frank S. Menniti</i>					<b>Date</b>	11/21/02
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<b>Post Office Address</b>							
<b>Post Office Address</b>	10 Reynolds Hill Road						
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

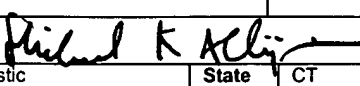
  

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Patricia A.				Seymour			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Westerly	<b>State</b>	RI	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b>	29 Little Brook Road						
<b>City</b>	Westerly	<b>State</b>	RI	<b>Zip</b>	02891	<b>Country</b>	USA

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Michael K.				Ahlijanian			
<b>Inventor's Signature</b>						<b>Date</b>	
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<b>Post Office Address</b>							
<b>Post Office Address</b> 5 Stanton Place							
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Anabella				Villalobos			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Niantic	<b>State</b>	CT	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b> 47 Greendcliff Drive							
<b>City</b>	Niantic	<b>State</b>	CT	<b>Zip</b>	06357	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Lit-Fui				Lau			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Mystic	<b>State</b>	CT	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b> 25 Hunting Ridge Drive							
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>		<b>State</b>		<b>Country</b>		<b>Citizenship</b>	
<b>Post Office Address</b>							
<b>Post Office Address</b>							
<b>City</b>		<b>State</b>		<b>Zip</b>		<b>Country</b>	

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Michael K.				Ahljanian			
Inventor's Signature						Date	
Residence: City		Mystic	State	CT	Country	USA	Citizenship
Post Office Address							
Post Office Address		8 Stanton Place					
City		Mystic	State	CT	Zip	06355	Country
						USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Anabella				Villalobos			
Inventor's Signature		<i>Anabella Villalobos</i>				Date	
Residence: City		Natic	State	CT	Country	USA	Citizenship
Post Office Address							
Post Office Address		47 Greenduff Drive					
City		Natic	State	CT	Zip	06357	Country
						USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Lil-Fu				Lau			
Inventor's Signature						Date	
Residence: City		Mystic	State	CT	Country	USA	Citizenship
Post Office Address							
Post Office Address		25 Hunting Ridge Drive					
City		Mystic	State	CT	Zip	06355	Country
						USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City			State		Country		Citizenship
Post Office Address							
Post Office Address							
City			State		Zip		Country



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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Michael K.				Ahlijanian			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Mystic	<b>State</b>	CT	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b>	5 Stanton Place						
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Anabella				Villalobos			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Niantic	<b>State</b>	CT	<b>Country</b>	USA	<b>Citizenship</b>	USA
<b>Post Office Address</b>							
<b>Post Office Address</b>	47 Greycliff Drive						
<b>City</b>	Niantic	<b>State</b>	CT	<b>Zip</b>	06357	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Lit-Fui				Lau			
<b>Inventor's Signature</b>	<i>Jan 25-02</i>					<b>Date</b>	
<b>Residence: City</b>	Mystic	<b>State</b>	CT	<b>Country</b>	USA	<b>Citizenship</b>	British
<b>Post Office Address</b>							
<b>Post Office Address</b>	25 Hunting Ridge Drive						
<b>City</b>	Mystic	<b>State</b>	CT	<b>Zip</b>	06355	<b>Country</b>	USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>		<b>State</b>		<b>Country</b>		<b>Citizenship</b>	
<b>Post Office Address</b>							
<b>Post Office Address</b>							
<b>City</b>		<b>State</b>		<b>Zip</b>		<b>Country</b>	